2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001401

Name:

Address:

City-St-Zip:

SCHWARTZ, GARY

2253 ROSELAWN

SARASOTA, FL

FILED May 01, 2006 Secretary of State

Entity Nan	ne: HOPE HOLI	DING CORPORATION			
Current Principal Place of Business:			New Principal Place of Business:		
6461 PROT SARASOTA	OR RD 4, FL 34241				
Current Mailing Address:			New Mailing Address:		
6461 PROC SARASOTA	OTOR RD. A, FL 34241				
	e with s. 607.193(2	FEI Number Applied For() FEI Nu)(b), F.S., the corporation did not receive rent Registered Agent:	-		
YOUNG, RO 6461 PROC SARASOTA	CTOR RD.	Js			
The above in the State	named entity sub of Florida.	omits this statement for the purpose of	of changing it	its registered office or registered agent, or both,	
SIGNATUR					
	Electronic	Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () De HARING, GEORGE 2950 BRAVURA LA SARASOTA, FL		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () De CHAMPION, DON 6840 HONEY SUC BRADENTON, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () De ALBRITTON, DAVII 150 HERONS RUN SARASOTA, FL	D	Title: Name: Address: City-St-Zip:	D (X) Change () Addition ZEA, ROBB 5661 OAKSHIRE AVE. SARASOTA, FL	
Title: Name: Address: City-St-Zip:	PD () De YOUNG, SCOTT 6461 PROTOR RD SARASOTA, FL 34)	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition YOUNG, ROBERT S 6461 PROTOR RD SARASOTA, FL 34241	
Title [.]	D ()De	elete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT S YOUNG Ρ 05/01/2006